



##
PATENT

Attorney's Docket No. D-339

COMBINED DECLARATION AND POWER OF ATTORNEY

(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL,
CONTINUATION OR CIP)

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is of the following type: (check one applicable item below)

original
 design

NOTE: If the declaration is for an International Application being filed as a divisional, continuation or continuation-in-part application do not check any of next two items and check appropriate one of last three items.

national stage of PCT
 supplemental

NOTE: If one of the following 3 items apply then complete and also attach ADDED PAGES FOR DIVISIONAL,
CONTINUATION OR CIP.

divisional
 continuation
 continuation-in-part (CIP)

INVENTORSHIP IDENTIFICATION

WARNING: If the inventors are each not the inventors of all the claims an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted.

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

Method and Reagents for Amplifying and Detecting
Nucleic Acid Sequences

SPECIFICATION IDENTIFICATION

the specification of which: (complete (a), (b) or (c))

(a) is attached hereto.
(b) was filed on June 24, 1988 as Serial No. 07/220,108
or Express Mail No., as Serial No. not yet known _____
and was amended on _____ (if applicable).

NOTE: Amendments filed after the original papers are deposited with the PTO which contain new matter are not accorded a filing date by being referred to in the declaration. Accordingly, the amendments involved are those filed with the application papers or, in the case of a supplemental declaration, are those amendments claiming matter not encompassed in the original statement of invention or claims. See 37 CFR 1.67.

(c) was described and claimed in PCT International Application No. _____ filed on _____ and as amended under PCT Article 19 on _____ (if any).

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations. § 1.56(a).

In compliance with this duty there is attached an information disclosure statement. 37 CFR 1.97.

PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

(complete (d) or (e))

(d) no such applications have been filed.
(e) such applications have been filed as follows

NOTE: Where item (c) is entered above and the International Application which designated the U.S. claimed priority check item (e), enter the details below and make the priority claim.

EARLIEST FOREIGN APPLICATION(S), IF ANY FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

COUNTRY	APPLICATION NUMBER	DATE OF FILING (month, day, year)	PRIORITY CLAIMED UNDER 37 USC 119
			<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
			<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
			<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
			<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
			<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>

ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION